

# EXHIBIT 3

## CLAIM FORM

**YOU MUST SUBMIT THIS CLAIM FORM BY MAY 27, 2016 IN ORDER TO RECEIVE PAYMENT UNDER THIS SETTLEMENT.**

*GOOD MORNING TO YOU PRODUCTIONS CORP., et al. v. WARNER/CHAPPELL MUSIC, INC., et al.*, Lead Case No. CV 13-04460-GHK (MRWx) (C.D. Cal. Western Division)

### INSTRUCTIONS

1. In order for a Settlement Class Member to receive a payment and participate in this Settlement, the Settlement Class Member or an authorized representative of such Settlement Class Member must properly complete all pages of this Claim Form, submit valid documentation of the Licensing Costs being claimed, and return the entire form electronically, by facsimile, or by U.S. mail, to the Settlement Administrator no later than May 27, 2016:

Electronically	By Facsimile	By U.S. Mail
Happy Birthday Lawsuit Settlement Rust Consulting, Inc. [Email] <a href="http://www.happybirthdaylawsuit.com">http://www.happybirthdaylawsuit.com</a>	Happy Birthday Lawsuit Settlement Rust Consulting, Inc. [ADDRESS] [CITY, STATE ZIP] [Fax Number]	Happy Birthday Lawsuit Settlement Rust Consulting, Inc. [ADDRESS] [CITY, STATE ZIP]

2. Under the Settlement Agreement—which contains the definitions of capitalized terms used in this Claim Form—a Settlement Class Member is defined as a Person who satisfies the following definition (and who does not submit a timely and valid exclusion request):

(a) all Persons who, at any time since September 3, 1949, directly paid Defendants, Intervenor, or any of their predecessors-in-interest (or any of the Affiliates of any of the foregoing) for each such Person's use of the musical work entitled *Happy Birthday to You!* with the lyrics, "Happy Birthday to you, Happy Birthday to you, Happy Birthday dear \_\_\_\_\_, Happy Birthday to you!" (referred to as the "Song");

(b) all Persons who, at any time since September 3, 1949, directly paid HFA, Alfred or Faber as agents for Defendants or their predecessors-in-interest for each such Person's use of the Song; or

(c) the American Society of Composers, Authors and Publishers (ASCAP), foreign collecting societies (such as, for example, SACEM and GEMA), and any other Person who at any time since September 3, 1949 has issued blanket licenses covering the Song, but only for the amounts allocated to the Song by such Persons and directly paid to Defendants or their predecessors-in-interest (or either's Affiliates) pursuant to such blanket licenses; or

(d)(i) digital rights aggregation services (such as, for example, Music Reports, Inc.), (ii) foreign sub-publishers (such as, for example, EMI Music Publishing Ltd.), and (iii) Persons not enumerated in sub-paragraph (b), (c), or items (i)-(ii) of this sub-paragraph (d) who directly paid Defendants, Intervenor, or any of their predecessors-in-interest (or any of the Affiliates of any of the foregoing) on behalf of other Persons for such other Persons' use of the Song at any time since September 3, 1949, but only to the extent that the Persons listed in items (i)-(iii) of this sub-

paragraph (d) directly paid Defendants, Intervenor, any of their predecessors-in-interest (or any of the Affiliates of any of the foregoing) amounts that were comprised of payments by or on behalf of other Persons for such other Persons' use of the Song.

In the case of payments referenced in sub-paragraphs (c) and (d), the Persons enumerated in sub-paragraphs (c) and (d) who made the direct payments to Defendants Intervenor, any of their predecessors-in-interest (or any of the Affiliates of any of the foregoing) are part of the Settlement Class, whereas the Persons on whose behalf such Persons obtained the rights to use the Song (whether through a blanket license or otherwise) are *not* part of the Settlement Class.

For purposes of this definition, the term "directly paid" includes payments made by a Person's accountant, attorney, business manager or similar agent acting for such Person solely in the capacity of remitting payment and not for the purpose of providing licensing services to other Persons. In the case of a direct payment by a Person's accountant, attorney, business manager or similar agent as described in the preceding sentence, said Person on whose behalf the payment is made is the Person in the Settlement Class (subject to all other requirements of this definition), and that Person's accountant, attorney, business manager or similar agent as described in the preceding sentence is not in the Settlement Class by virtue of that payment.

Excluded from the Settlement Class are the following: (I) Defendants, their Affiliates, and HFA, and their respective officers, directors and employees; (II) Intervenor, their subsidiaries, and Affiliates and their respective officers, directors, employees; and (III) Class Counsel, Defendants' Counsel, and Intervenor's Counsel. For the avoidance of doubt, Alfred and Faber are part of the Settlement Class under sub-paragraph (a) with respect to their own direct licenses of the Song from Defendants or their predecessors-in-interest (or either's Affiliates), but only the sub-licensees of Alfred and Faber are part of the Settlement Class under sub-paragraph (b).

3. If you (or the Person on whose behalf you are submitting this Claim Form, if applicable) do not satisfy the definition above, which is set forth in Section 1.53 of the Settlement Agreement, then you (or the Person on whose behalf you are submitting this Claim Form) are not a member of the Settlement Class and are not entitled to receive payment from the Settlement Administrator.
4. A Settlement Class Member may submit only one Claim Form for ***all*** of its Period One Licensing Costs and for ***all*** of its Period Two Licensing Costs. Please be sure to include ***all*** the Settlement Class Member's Period One Licensing Costs and ***all*** the Settlement Class Member's Period Two Licensing Costs on this Claim Form.
5. Any Claim Form that is not received electronically or by facsimile, or is not post-marked by U.S. mail, on or before May 27, 2016, or is not signed and dated by the Settlement Class Member (or an authorized representative of such Settlement Class Member, if applicable) under penalty of perjury, or does not contain valid documentation of Licensing Costs (e.g., copies of receipts, email or letter confirmations, executed licenses, pursuant to Sections 3.2.4 and 3.2.5 of the Settlement Agreement), shall *not* constitute a valid claim, and payment may be denied unless otherwise ordered by the Court. The Settlement Administrator may follow up with you (or the Settlement Class Member on whose behalf you are submitting this Claim Form, if applicable) for additional information, but it is not obligated to do so. For more information on the Settlement and how payments will be calculated, as well as the rights of Settlement Class Members in connection with

the Settlement, please see the Notice of Proposed Class Action Settlement and the Settlement Agreement, which are available online at <http://www.happybirthdaylawsuit.com>.

6. DO NOT MAIL OR DELIVER THE COMPLETED CLAIM FORM TO THE COURT, THE PARTIES TO THIS ACTION, OR THEIR COUNSEL. Submit the Claim Form ONLY to the Settlement Administrator in the manner set forth above.
7. FOR RECORD KEEPING PURPOSES, YOU SHOULD MAKE AND RETAIN A COPY OF THE SIGNED CLAIM FORM UNTIL PAYMENT FROM THE SETTLEMENT ADMINISTRATOR IS RECEIVED.
8. CHANGE OF ADDRESS: It is your responsibility to keep on file with the Settlement Administrator the current address of the Settlement Class Member. This is the address that will be used to mail payment and tax forms. If you are submitting this Claim Form on behalf of a Settlement Class Member, it is also your responsibility to keep on file with the Settlement Administrator your current address. Please make sure to notify the Settlement Administrator of any change to the Settlement Class Member's address and of any change to your address (again, if you are submitting this Claim Form on behalf of a Settlement Class Member).

**PART I: SETTLEMENT CLASS MEMBER INFORMATION**

\_\_\_\_\_  
Name of Settlement Class Member (*i.e.*, the Person who made a direct payment to Defendants, Intervenor, any of their predecessors-in-interest (or any of the Affiliates of any of the foregoing) or HFA, Alfred or Faber as defined above and in Section 1.53 of the Settlement Agreement)

\_\_\_\_\_  
Settlement Class Member's Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
( )

\_\_\_\_\_  
Telephone No. (Day)

\_\_\_\_\_  
( )

\_\_\_\_\_  
Telephone No. (Night)

\_\_\_\_\_  
Settlement Class Member's Email Address

**OR**

\_\_\_\_\_  
Settlement Class Member's  
Social Security Number  
(for individuals)

\_\_\_\_\_  
Settlement Class Member's  
Taxpayer Identification Number  
(for estates, trusts, corporations, etc.)

If the Settlement Class Member remitted payment through an accountant, attorney, business manager or other similar agent (acting solely in the capacity of remitting payment, and not for the purpose of providing licensing services to the Settlement Class Member), please provide the name(s) of such accountant(s), attorney(ies), business manager(s) or other similar agent(s) (*attach additional pages as necessary*): \_\_\_\_\_

**If Applicable:** Name of Person Submitting this Claim Form as the Authorized Representative of a Settlement Class Member \_\_\_\_\_

\_\_\_\_\_  
Street Address of Authorized Representative

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
( )

\_\_\_\_\_  
Telephone No. (Day)

\_\_\_\_\_  
( )

\_\_\_\_\_  
Telephone No. (Night)

\_\_\_\_\_  
Email Address of Authorized Representative

**PART II: PERIOD ONE PAYMENT INFORMATION**

LIST **ALL** SETTLEMENT CLASS MEMBER'S DIRECT PAYMENTS TO DEFENDANTS, INTERVENORS, EITHER OF THEIR AFFILIATES, HFA, ALFRED OR FABER FOR USE OF THE SONG ON OR AFTER JUNE 13, 2009:

Date of Payment (chronologically) Month/day/year	Amount of Payment	Person or Entity Making Payment	Entity to Whom Payment Was Made	Person or Entity on Whose Behalf Payment Was Made*	Description of Documentation of Payment
/ /	\$				
/ /	\$				
/ /	\$				
/ /	\$				
/ /	\$				
/ /	\$				
/ /	\$				

Please attach additional pages as necessary. **You must submit valid documentation of Licensing Costs** (e.g., copies of receipts, email or letter confirmations, executed licenses, pursuant to Sections 3.2.4 and 3.2.5 of the Settlement Agreement) with this Claim Form.

\* The information in this column is necessary only if the payment was remitted to Defendants, Intervenor, either of their Affiliates, HFA, Alfred or Faber by the Settlement Class Member's accountant, attorney, business manager or other similar agent (acting solely in the capacity of remitting payment, and not for the purpose of providing licensing services to the Settlement Class Member).

**PART III: PERIOD TWO PAYMENT INFORMATION**

LIST **ALL** SETTLEMENT CLASS MEMBER'S DIRECT PAYMENTS TO DEFENDANTS, INTERVENORS, ANY OF THEIR PREDECESSORS-IN-INTEREST (OR ANY OF THE AFFILIATES OF ANY OF THE FOREGOING), HFA, ALFRED OR FABER FOR USE OF THE SONG **BEFORE JUNE 13, 2009**:

<b>Date of Payment (chronologically) Month/day/year</b>	<b>Amount of Payment</b>	<b>Person or Entity Making Payment</b>	<b>Entity to Whom Payment Was Made</b>	<b>Person or Entity on Whose Behalf Payment Was Made*</b>	<b>Description of Documentation of Payment</b>
/ /	\$				
/ /	\$				
/ /	\$				
/ /	\$				
/ /	\$				
/ /	\$				
/ /	\$				

Please attach additional pages as necessary. **You must submit valid documentation of Licensing Costs** (e.g., copies of receipts, email or letter confirmations, executed licenses, pursuant to Sections 3.2.4 and 3.2.5 of the Settlement Agreement) with this Claim Form.

\* The information in this column is necessary only if the payment was remitted to Defendants, Intervenor, any of their predecessors-in-interest (or any of the Affiliates of any of the foregoing) or HFA, Alfred or Faber by a Settlement Class Member's accountant, attorney, business manager or other similar agent (acting solely in the capacity of remitting payment, and not for the purpose of providing licensing services to the Settlement Class Member).

**PART III: SUBSTITUTE FORM W-9**

(You must provide the requested information here even if you have already provided the same or similar information in the Settlement Class Member Identity section of this Claim Form. This information is required in order to receive payment under the Settlement.)

Enter taxpayer identification number below for the Settlement Class Member (*i.e.*, the Person who made a direct payment to Defendants or their predecessors-in-interest (or either's Affiliates) or HFA, Alfred or Faber as defined above and in Section 1.53 of the Settlement Agreement). For most individuals, this is the individual's Social Security Number. The Internal Revenue Service ("I.R.S.") requires such taxpayer identification number. If this information is not provided, the Settlement Class Member's claim may be rejected.

**OR**

\_\_\_\_\_  
Settlement Class Member's  
Social Security Number  
(for individuals)

\_\_\_\_\_  
Settlement Class Member's  
Taxpayer Identification Number  
(for estates, trusts, corporations, etc.)

Check Which Of the Following Describes the Settlement Class Member:

\_\_\_ Individual \_\_\_ Corporation \_\_\_ Trust \_\_\_ Estate \_\_\_ IRA Account \_\_\_ Other (specify)

**PART IV: DIRECT DEPOSIT OR CHECK**

**CHOOSE ONE OF THE OPTIONS BELOW**

☐ **OPTION 1: Payment by Direct Deposit**

If any payment is made, the Settlement Class Member wishes to receive it electronically by ACH (Automated Clearing House)

Please provide the Settlement Class Member's bank account information:

Bank Routing Number: \_\_\_\_\_

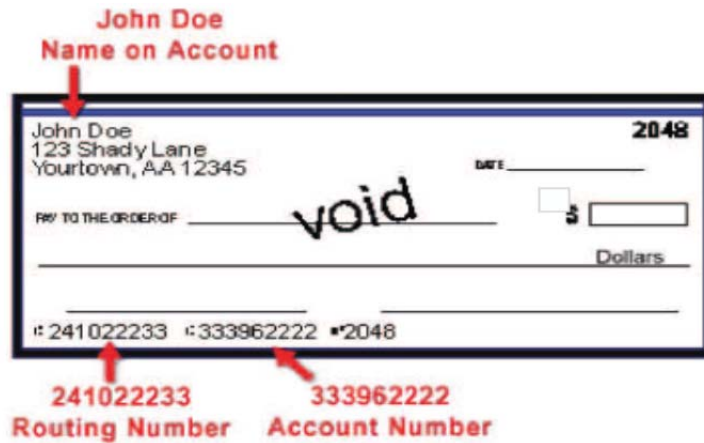
Bank Account Number: \_\_\_\_\_

Banking Institution: \_\_\_\_\_

Name on Account: \_\_\_\_\_

The illustration below is to help you identify the Settlement Class Member's Routing and Account Number. If you still are unsure which number on the check is which, please contact the Settlement Class Member's financial institution.





☐ **OPTION 2: Payment by Check**

If any payment is made, instead of receiving payment electronically by ACH, the Settlement Class Member wishes to receive payment by a paper check sent to the Settlement Class Member at the Settlement Class Member's address *as provided in Part I of this Claim Form*.

**PART V: CERTIFICATION OF SETTLEMENT CLASS MEMBER**

UNDER THE PENALTIES OF PERJURY, I (WE) CERTIFY THAT ALL OF THE INFORMATION PROVIDED ON THIS FORM IS TRUE, CORRECT AND COMPLETE.

I (We) certify that I am (we are) NOT subject to backup withholding under the provisions of Section 3406 (a)(1)(c) of the Internal Revenue Code because: (a) I am (we are) exempt from backup withholding, or (b) I (We) have not been notified by the I.R.S. that I am (we are) subject to backup withholding as a result of failure to report all interest or dividends, or (c) the I.R.S. has notified me (us) that I am (we are) no longer subject to backup withholding.

NOTE: If you have been notified by the I.R.S. that you are subject to backup withholding, please strike out the language that you are not subject to backup withholding in the certification above.

I (we) certify that, if I am (we are) acting as the representative for a Settlement Class Member, I am (we are) currently authorized to act on behalf of the Settlement Class Member.

Signature of Settlement Class Member or Authorized Representative of such Settlement Class Member \*:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*If the person executing this Claim Form is acting in a representative capacity, evidence of such person's current authority to act on behalf of the Settlement Class Member must be submitted with this Claim Form (e.g., proof of power of attorney).

**ACCURATE CLAIMS PROCESSING TAKES A SIGNIFICANT AMOUNT OF TIME.  
THANK YOU FOR YOUR PATIENCE.**

Reminder Checklist:

1. Please complete the Substitute W-9 and sign the above Certification.
2. Make sure you have enclosed valid documentation of Licensing Costs (*e.g.*, copies of receipts, email or letter confirmations, executed licenses, pursuant to Sections 3.2.4 and 3.2.5 of the Settlement Agreement).
3. Keep a copy of the completed Claim Form for record-keeping purposes.
4. If you desire an acknowledgment of receipt of this Claim Form, please send it Certified Mail Return Receipt Requested.
5. If you move after submitting your Claim Form, please send your new address to the Settlement Administrator. If you are submitting this Claim Form on behalf of the Settlement Class Member and that Settlement Class Member moves after this Claim Form is submitted, please send that Settlement Class Member's new address to the Settlement Administrator.